U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards Washington, DC 20210 FOR USE BY LABOR ORGANIZATIONS WITH THE PROPERT OF THE PROPERT OF

Form Approved Office of Management and Budget No. 1215-0188 Expires:11-30-2002

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

	READ THE II	NSTRUCTIONS CAREFI	JLLY BEFORE PREPARING	THIS REPORT.	
For Official size Sinly	1. FILE NUMBER	2. PERIOD COVERED) AMENDED — If this is an amended report correcting a p filed report, check here:	reviously
007-32Mp	003-067		DAY YEAR (b) 1 2 0 0 1 (b)	TERMINAL — If your organization ceased to exist and the terminal report, see Section XII of the instructions and chemical reports.	nis is its
16	00000		(c	SUBSIDIARY - If this is a report for a subsidiary organiz	zation of
E				your union as defined in Section X of the instructions, che	eck here:
			G ADDRESS		
		First Nam	ne l		1
			L L		
•		Last Nam			
	•	E V	ANGO		
		P.O. Box	· Building and Room Number	(if any)	
4. AFFILIATION OR ORGANIZATION	NAME	Number	and Street		
CARPENTERS IND		3 2		TA STREET	
5. DESIGNATION (Local, Lodge, etc.)	1	N NUMBER L			
LU	515	City			
7. UNIT NAME (if any)		c <u>o</u>	LORADO S	SPRINGS	
O Are your expenientianle records ken	e stite mailing add-coo?	State	ZIP Code + 4		
 Are your organization's records kep (If "No," provide address in Item 56.)) Yes		80909 -	6 2 8 5	
56. ADDITIONAL INFORMATION					
Item Number					
					•
Each of the undersigned, duly authorized o	officers of the above labor organization	on, declares, under the applie	cable penalties of law, that all of th	ne information submitted in this report (including the informatorrect, and complete. (See Section VI on penalties in the ins	ation contained
57. Quilli	Total miles by the signatory and is, i	PRESIDENT	58. SIGNED:	0014	REASURER
SIGNED:	- N. Wate	 (If other title,		and the same of th	If other title,
9-9-2002	719-632-8971	see instructions.)	9-9-2002	719-632-8971 s	see instructions.)
Date	Telephone Number		Date	Telephone Number	

10.	Have a "subsidiary organization" as defined in Section X of the instructions? Create or participate in the adminstration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries?	Yes	No ⊠		How many members dorganization have at the reporting period? What is the maximum arecoverable under your fidelity bond for a loss of any officer or employed organization?	amount r organization's caused by	\$	5 0 0	5 5	
12.	Have a political action committee (PAC) fund?		\boxtimes	21.	During the reporting pe organization have any constitution and bylaws	changes in its		٧	es	No
13.	Acquire or dispose of any goods or property in any manner other than by purchase or sale?		X		rates of dues and fees) procedures listed in the (If the constitution and) or in practices/ e instructions?		Ĺ		X
14.	Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative?	\boxtimes		22	practices/ procedures see the instructions.)	have changed,			YEAR	
15.	Discover any loss or shortage of funds or other property?		X		What is the date of you next regular election o	f officers?		0 6 2	0 0	3
	(Answer "Yes" even if there has been repayment or recovery.)			23.	What are your organiz dues and fees? (Enter a minimum and		~a			
16.	Have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or				than one rate applies i		0			
	more as an officer or employee of another labor organization or of an employee benefit plan?		X					s and Fees		
17.	Pay any employee salary, allowances, and other expenses which, together with any payments				(a) Regular Dues/Fees	\$		MONTH (Month, Year,	etc.)	
	from affiliates, totaled more than \$10,000?		X		(b) Initiation Fees	\$	00			
18.	Have loans totaling more than \$250 to any officer, employee, or member, or make any loans to a	П	X		(c) Transfer Fees	\$	NE 			
	business enterprise?				(d) Work Permits	\$	00 M — per—	MONTH		_
	he answer to any of the above questions is "Yes," provide em 56 as explained in the instructions for each item.)	details	;		. ,			(Month, Year,	etc.)	

24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Enter Amounts in Dollars Only - Do Not Enter Cents

FILE NUMBER: 0 0 3 - 0 6 7

	(A) Name (List all persons who held office during the reporting period even they received no salary or other disbursements. Use all capital le	etters.)	Gross Salary (before taxes and	Allowances and Other		
	(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)*	other deductions) (D)	Disbursements (E)	Total (F)	
	LEE	BILL	0	267	2	Ь
1.	PRESIDENT	С				
2.	ПОЗЧМОНТ	MARK	0	2 8 2	2	a
۷.	VICE PRESIDENT	C				
2	HETZLER	L ANCE	0			
3.	TREASURER	C				
4.	BERGER	JAMES	0	5 1 5	5	1
4.	FINANCIAL SECRETARY	Р				
5.	SACKETT, JR	RON	0	282	5	8
ə.	TRUSTEE	C				
6.	ESTEP	FRANK	0	2 2 5	2	2
·-	TRUSTEE	C				
7.	HENLINE	CURTIS	0	2 2 5	2	2
	RECORDING SECR	Р			·	
8.	Totals from additional pages (if any)		0	9 1 0	9	1 0
9.	Totals of Lines 1 through 8		0	2706	2 7	0 6
,				10. Less Deductions		C
	The Total from Line 11 in		ltem 45	11. Net Disbursements	2 7	0.6
* Co	de for Status (C): past officer - P; continuing officer - C; new offic	er during the repor	ting period - N. (If ar	ny officer was not elected at a regular e organization's constitution and bylaws	election in accordance w , explain in Item 56 .)	ith

Enter Amounts in Dollars Only - Do Not Enter Cents

FILE NUMBER: 0 0 3 - 0 6 7

	ASSETS Item	Start of Reporting Period (A)	End of Reporting Period (B)	LIABILITIES Item	Start of Reporting Period (C)	End of Reporting Period (D)
ဖွ	25. Cash	7 2 7 2 1	4 3 9 6 4	32. Accounts Payable	0	0
ENT A	26. Loans Receivable	0	0	33. Loans Payable	0	0
	27. U.S. Treasury Securities	0	0	34. Mortgages Payable	0	0
ATEM	28. Investments	1 0 4 7 1 4	1 4 2 8 1 6	35. Other Liabilities	0	0
ST.	29. Fixed Assets	2 0 4 2 2 6	2 1 3 4 1 0	36. TOTAL LIABILITIES	0	0
AS	30. Other Assets	0	0			
	31. TOTAL ASSETS	3 8 1 6 6 1	4 0 0 1 9 0	37. NET ASSETS (Item 31 less Item 36)	3 8 1 6 6 1	4 0 0 1 9 0

	CASH RECEIPTS	AMOUNT	CASH DISBURSEMENTS	AMOUNT
	Item		Item	
	38. Dues	1 2 3 2 3 2	45. To Officers (from Item 24)	2 7 0 6
မှ	39. Per Capita Tax	0	46. To Employees (less deductions)	0
N H	40. Fees, Fines, Assessments & Work Permits	1 1 2 7	47. Per Capita Tax	5.3 6 9 0
EMENT B DISBURSEMENTS	41. Interest & Dividends	4 7 9 7	48. Office & Administrative Expense	8 0 0 7
STATEMENT S AND DISBUF	42. Sale of Investments & Fixed Assets	1 3 2 3	49. Professional Fees	2 8 0 0
ATE!	43. Other Receipts	8 5 8 8	50. Benefits	0
	44. TOTAL RECEIPTS	1 3 9 0 6 7	51. Contributions, Gifts & Grants	6 9 7 2
RECEIPT			52. Purchase of Investments & Fixed Assets	6 0 7 4 1
<u> </u>	If total receipts reported in Item 44		53. Loans Made	0
	or more, your organization must fi instead of this form.	le Form LM-2	54. Other Disbursements	3 2 9 0 8
			55. TOTAL DISBURSEMENTS	1 6 7 8 2 4

ORGANIZATION NAME:	
CARPENTERS IND	
ENDING DATE OF PERIOD COVERED:	

06/30/2002

FILE NUMBER: 0 0 3 - 0 6 7

24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name	(List all persons who held office during the reporting period ever they received no salary or other disbursements. Use all capital	ı if	Gross Salary (before taxes and	Allowances and Other			
Title	(Enter title of officer, such as PRESIDENT or TREASURER.)	(C) Status *	other deductions) (D)	Disbursements (E)	Total (F)		
NIXON		LARRY	0	2 2 5	2	2	5
TRUSTEE	<u>-</u>	Р					
CARRILL	_0	LUIZ		7 5		7	5
WARDEN		Р		:			
VALVERI	DE	FELIX	0	3 & 5	3	8	5
CONDUCT	TOR	C					
HETZER	D	ENILE	٥	2 2 5	2	2	5
TREASUR	RER	C					
EVANGO		BILL	0	0			O
FINANCI	IAL SECRETARY	N					
PATTON	E	UGENE	0	0			0
RECORD1	ING SEC	N					
C0URTR1	IGHT	JEFF	П	0			0
TRUSTEE	Ξ	N					
ZABOL	A	NDREW	0	0			Ö
WARDEN		N					

ORGANIZATION NAME: CARPENTERS IND	
ENDING DATE OF PERIOD COVERED: 06/30/2002	

FILE NUMBER: 0 0 3 - 0 6 7

56. ADDITIONAL INFORMATION (continued)

	DITIONAL IN ONINATION (Commission)
Item Number	
14	Annual audit performed by Dell & Needles, Inc.
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ORGANIZATION NAME: CARPENTERS IND	
ENDING DATE OF PERIOD COVERED: 06/30/2002	

FILE NUMBER: 0 0 3 - 0 6 7

56. ADDITIONAL INFORMATION (continued)

9	MOUNTAIN WEST REGIONAL COUNCIL OF CARPENTERS 5155 E 39TH AVENUE DENVER, COLORADO 80207-1108	